

## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?: NONE  
Title:: STABLE LIQUID PREPARATION  
Attorney Docket Number:: 281552US0PCT  
Total Drawing Sheets:: 1

## INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Yoichi  
Family Name:: IKEDA  
City of Residence:: Akitakata-shi  
State or Province of Residence:: Hiroshima  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Wakunaga Pharmaceutical Co., Ltd.,  
1624, Shimokotachi, Kodacho  
City of Mailing Address:: Akitakata-shi  
State or Province of Mailing Address:: Hiroshima  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 739-1195  
Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Japan  
Status:: FULL CAPACITY  
Given Name:: Soko  
Family Name:: MOTOUNE  
City of Residence:: Akitakata-shi  
State or Province of Residence:: Hiroshima  
Country of Residence:: Japan  
Street of Mailing Address:: c/o Wakunaga Pharmaceutical Co., Ltd.,  
1624, Shimokotachi, Kodacho  
City of Mailing Address:: Akitakata-shi  
State or Province of Mailing Address:: Hiroshima  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 739-1195

Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: Japan  
 Status:: FULL CAPACITY  
 Given Name:: Mizuho  
 Family Name:: ONO  
 City of Residence:: Akitakata-shi  
 State or Province of Residence:: Hiroshima  
 Country of Residence:: Japan  
 Street of Mailing Address:: c/o Wakunaga Pharmaceutical Co., Ltd.,  
 1624, Shimokotachi, Kodacho  
 City of Mailing Address:: Akitakata-shi  
 State or Province of Mailing Address:: Hiroshima  
 Country of Mailing Address:: Japan  
 Postal or Zip Code of Mailing Address:: 739-1195

Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: Japan  
 Status:: FULL CAPACITY  
 Given Name:: Yoshifumi  
 Family Name:: MOHRI  
 City of Residence:: Akitakata-shi  
 State or Province of Residence:: Hiroshima  
 Country of Residence:: Japan  
 Street of Mailing Address:: c/o Wakunaga Pharmaceutical Co., Ltd.,  
 1624, Shimokotachi, Kodacho  
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 Country of Mailing Address:: Japan  
 Postal or Zip Code of Mailing Address:: 739-1195

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP04/08990	06/25/04

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2003-184881	Japan	06/27/03	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: WAKUNAGA PHARMACEUTICAL CO., LTD.

Street of Mailing Address:: 5-36, Miyahara 4-chome, Yodogawa-ku

City of Mailing Address:: Osaka-shi

State or Province of Mailing Address:: Osaka

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 532-0003